

REIMBURSEMENT SCHEDULE

Percentage of Federal Income Level	Copayment Per Individual Treatment	Maximum Monthly Cost Share
0% - 250%	\$0	\$0
251% - 350%	\$3	\$24
351% - 450%	\$6	\$48
451% - 550%	\$15	\$120
551% - 650%	\$25	\$200
651% - 750%	\$50	\$400
751% - 850%	\$75	\$600
851% - 1000%	\$100	\$800
1001% +	\$120	\$960



*"People
helping people
help
themselves"*